



REQUEST FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number (Optional) <b>1945.BDM</b>										
In re-Application of <b>Skrzyniarz et al.</b>												
U.S. Application Number <b>09/916,779</b>		International Filing Date: <b>07/27/2001</b>										
For: <b>FOAMED ADHESIVE AND USE THEREOF</b>												
Group Art Unit <b>1771</b>		Examiner: <b>Victor C. Chang</b>										
<p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above-identified application.</p> <p>The requested extension and appropriate non-small-entity fee are as follows (check time period desired):</p> <table><tr><td><input type="checkbox"/> One month (37 CFR 1.17(a) (1))</td><td>\$ _____</td></tr><tr><td><input checked="" type="checkbox"/> Two months (37 CFR 1.17(a) (2))</td><td>\$ <u>420.00</u></td></tr><tr><td><input type="checkbox"/> Three months (37 CFR 1.17(a) (3))</td><td>\$ _____</td></tr><tr><td><input type="checkbox"/> Four months (37 CFR 1.17(a) (4))</td><td>\$ _____</td></tr><tr><td><input type="checkbox"/> Five months (37 CFR 1.17(a) (5))</td><td>\$ _____</td></tr></table> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is \$ _____</p> <p><input type="checkbox"/> A check in the amount of the fee is enclosed.</p> <p><input type="checkbox"/> Payment by credit card Form PTO-2038 is attached.</p> <p><input type="checkbox"/> The Commissioner has already been authorized to charge fees in this application to a Deposit Account.</p> <p><input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>14-0455</u></p> <p>I have enclosed a duplicate copy of this sheet.</p> <p>I am the <input type="checkbox"/> applicant/inventor <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).</p> <p><input checked="" type="checkbox"/> attorney or agent of record <input type="checkbox"/> attorney or agent under 37 CFR 1.34(a) Registration number if acting under 37 CFR 1.34(a) _____</p> <p>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</p> <p><u>11-13-2003</u> Date</p> <p><u>Cynthia L. Foulke</u> Signature</p> <p><u>Cynthia L. Foulke</u> Typed or Printed Name</p> <p>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required below.</p> <p><input checked="" type="checkbox"/> Total of <u>1</u> forms are submitted.</p>			<input type="checkbox"/> One month (37 CFR 1.17(a) (1))	\$ _____	<input checked="" type="checkbox"/> Two months (37 CFR 1.17(a) (2))	\$ <u>420.00</u>	<input type="checkbox"/> Three months (37 CFR 1.17(a) (3))	\$ _____	<input type="checkbox"/> Four months (37 CFR 1.17(a) (4))	\$ _____	<input type="checkbox"/> Five months (37 CFR 1.17(a) (5))	\$ _____
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